JASS APPLICATION FORM

RA	TE/NAME:			SSN:				_
			(LAST, FIRS	ST MI)			
PRD:			<u>I</u>	EAOS:		SEX:		
(MMMYY)		(DDMMMYY)			YY)	(M/F)		
DE	PARTMENT:		LOCATIO	ON:				_
<u>AF</u>	E YOU MAR	RIED?	1	NO / *YE	S * <u>IF YES,</u>	IS YOUR SPOUSE MILIT.	ARY? NO / YE	S
	RATE	SS	PRI #	NEC	UIC	ACTIVITY	LOCA	ATION
1								
2								
3								
4								
5								
							I	
COMMENTS FOR THE DEATILER:								
NOTES:								
1	THE APPL	ICATIO	N REOUE	ST AROV	E ARE ON	IV REQUESTED BILLE	TS THE WEEK AFT	FR VOUR
1. THE APPLICATION REQUEST ABOVE ARE ONLY REQUESTED BILLETS. THE WEEK AFTER YOUR APPLICATION, YOU NEED TO CONTACT YOUR DEPARTMENT / DIVISION CAREER COUNSELOR TO FIND OUT YOUR RESULTS OF YOUR APPLICATION.								
2. MEMBER HAS BEEN COUNSELED ABOUT SELECTION IRT RATE, PAYGRADE, PRD, LOCATION, ECT								
3. MEMBER MAY BE AUTOMATICALLY GIVEN PCS ORDERS BY THE DETAILER IF THEY HAVE NOT NEGOTIATED OR APPLIED FOR ANY BY THEIR SIX (6) MONTH WINDOW OF THEIR PRD.								
4. FOR ANY QUESTIONS, PLEASE CONTACT YOUR DEPARTMENT/DIVISION CAREER COUNSELOR.								
_	APPLICAN	T'S SI	GNATURF	/ DATE		COLINSE	LOR'S SIGNATURE / DA	TE